Attorney or Party Name, Address, Phone & Fax Nos., State Bar No. & Email	FOR COURT USE ONLY
Benjamin Heston Bar Number: 297798 Nexus Bankruptcy 100 Bayview Circle, Suite 100 Newport Beach, CA 92660 Phone: (951) 290-2827 Email: ben@nexusbk.com ❑ Debtor(s) appearing without an attorney ☑ Attorney for Debtor(s)	

United States Bankruptcy Court
Central District of California - Riverside Division

In re: Brittany Moore Ryan Moore Debtor(s).	CASE NO.: 6:22-bk-13671-WJ CHAPTER: Chapter 7 **DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE** [11 U.S.C. § 521(a)(1)(B)(iv)] [No hearing required]

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

1. ☑ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

    During the 60-day period before the Petition Date (*Check only ONE box below*):

    ☑ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (*If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.*)

    ❑ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: 10/13/2022 _____   Brittany Moore   _____ *Signature*
                                                        Printed name of Debtor 1   Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (if applicable)

2. ☑ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

    During the 60-day period before the Petition Date (*Check only ONE box below*):

    ☑ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (*If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.*)

    ❑ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: 10/13/2022 _____   Ryan Moore   _____ *Signature*
                                                        Printed name of Debtor 2   Signature of Debtor 2

This form is mandatory. It has been approved for use by the United States Bankruptcy Court for the Central District of California.

December 2015   F 1002-1.EMP.INCOME.DEC

CALIFORNIA FAMILY LIFE CENTER
PO Box 727
Hemet CA 92546

A790-7874
ORG1:3 231 Hemet Ranch
EE ID: 101250   DD

Payrolls by Paychex, Inc.

BRITTANY MOORE
29662 EASTBANK DR.
MENIFEE CA 92585

NON-NEGOTIABLE

Payrolls by Paychex, Inc.

NON-NEGOTIABLE

PERSONAL AND CHECK INFORMATION
Brittany Moore
29662 Eastbank Dr.
Menifee, CA 92585
Soc Sec #: xxx-xx-xxxx   **Employee ID:** 101250

Home Department: 3 231 Hemet Ranch

Pay Period: 09/01/22 **to** 09/15/22
Check Date: 09/22/22   **Check #:** 18753

NET PAY ALLOCATIONS

DESCRIPTION	THIS PERIOD ($)	YTD ($)
Check Amount	0.00	0.00
Chkg 704	3634.03	7311.37
NET PAY	**3634.03**	**7311.37**

TIME OFF (Based on Policy Year)

DESCRIPTION	AMT TAKEN	TOTAL BAL
PTO3	0.00 hrs	10.00 hrs

EARNINGS	BASIS OF PAY	DESCRIPTION	HRS/UNITS	RATE	THIS PERIOD ($)	YTD HOURS	YTD ($)
		Salary			4333.34		8666.68
		Holiday	M8.00			M8.00	
		Total Hours	8.00			8.00	
		Gross Earnings			4333.34		8666.68
		Total Hrs Worked					
		Cell Phone Reimb					25.00
		REIMB & OTHER PAYMENTS					25.00

WITHHOLDINGS	DESCRIPTION	FILING STATUS	THIS PERIOD ($)	YTD ($)
	Social Security		267.88	536.55
	Medicare		62.65	125.48
	Fed Income Tax	J	38.53	78.58
	CA Income Tax	SMI2 0 4	260.49	522.27
	CA Disability		47.53	95.20
	TOTAL		677.08	1358.08

DEDUCTION	DESCRIPTION	THIS PERIOD ($)	YTD ($)
	Medical	12.67	12.67
	Principal Post-	9.56	9.56
	TOTAL	22.23	22.23

NET PAY	THIS PERIOD ($)	YTD ($)
	3634.03	**7311.37**

Payrolls by Paychex, Inc.

0942 A790-7874 California Family Life Center · PO Box 727 · Hemet CA 92546 · (951) 765-6955

SHARP

Sharp HealthCare   8695 Spectrum Center Blvd San Diego, CA 92123   (858) 499-8300

Name	Company	Employee ID	Base Pay	Pay Period Begin	Pay Period End	Check Date	Check Number
Brittany Moore	Sharp HealthCare	462151	46.36	07/24/2022	08/06/2022	08/12/2022	

	Hours Worked	Gross Pay	Pre Tax Deductions	Employee Taxes	Post Tax Deductions		Net Pay
Current	56.00	3,576.36	215.50	486.99	16.74		2,857.13
YTD	980.50	61,094.06	3,448.00	8,548.91	267.84		48,829.31

Earnings

Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount
DOUBLETIME			0		5.5	532.31
EVENING SHIFT			0		11.75	32.32
FAMILY LOA/ILL			0		31.39	1,464.39
HOLIDAY PAY			0		23.75	1,651.58
NO MEAL			0		4	202.22
OVERTIME			0		21	1,503.45
SPSL			0		79	3,662.44
TRAINING - DT			0		1.75	169.32
NIGHT SHIFT	07/24/22 - 07/30/22	23.5	4.25	99.88		
PAID TIME OFF	07/24/22 - 07/30/22	3.5	46.36	162.26		
REGULAR	07/24/22 - 07/30/22	23.5	46.36	1,089.46		
TRAINING - REG	07/24/22 - 07/30/22	8.5	46.36	394.06	8.75	405.65
EXT SICK	07/31/22 - 08/06/22	8.6	50.61	435.25	14.73	834.63
NIGHT SHIFT	07/31/22 - 08/06/22	24	4.25	102.00	958.25	4,072.67
PAID TIME OFF	07/31/22 - 08/06/22	3.9	46.36	180.81	84.63	3,923.47
REGULAR	07/31/22 - 08/06/22	24	46.36	1,112.64	919.75	42,639.61
Earnings				3,576.36		61,094.06

Employee Taxes

Description	Amount	YTD
OASDI	208.47	3,575.58
Medicare	48.76	836.23
Federal Withholding	0.00	147.82
State Tax - CA	192.79	3,355.17
CA SDI - CASDI	36.97	634.11
Employee Taxes	486.99	8,548.91

Pre Tax Deductions

Description	Amount	YTD
Ee - Premium Dental	30.00	480.00
Ee - Premium HMO	185.50	2,968.00
Pre Tax Deductions	215.50	3,448.00

Post Tax Deductions

Description	Amount	YTD
Ee - Parking	2.50	40.00
Ee - Spouse Life	7.82	125.12
Ee - Supp Life Ins	6.42	102.72
Post Tax Deductions	16.74	267.84

Employer Paid Benefits

Description	Amount	YTD
IMPUTED LIFE	1.54	24.64
Employer Paid Benefits	1.54	24.64

Taxable Wages

Description	Amount	YTD
OASDI - Taxable Wages	3,362.40	57,670.70
Medicare - Taxable Wages	3,362.40	57,670.70
Federal Withholding - Taxable Wages	3,362.40	57,670.70
State Tax Taxable Wages - CA	3,362.40	57,670.70

	Federal	State
Marital Status	Married filing jointly (or Qualifying widow(er))	Single or Married (with two or more incomes)
Allowances	0	1
Additional Withholding	0	0

Absence Plans

Description	Accrued	Reduced	Available
ESI	2.15	8.6	2.15
PTO	7.69	7.4	52.79
SPSL	0	0	1

Payment Information

Bank	Account Name	Account Number	USD Amount	Amount	
"SCHOOLSFIRST FED CREDIT UNION"	Checking	******4704		2,857.13	USD

SHARP®

Sharp HealthCare   8695 Spectrum Center Blvd San Diego, CA 92123   (858) 499-8300

Name	Company	Employee ID	Base Pay	Pay Period Begin	Pay Period End	Check Date	Check Number
Brittany Moore	Sharp HealthCare	462151	46.36	08/07/2022	08/20/2022	08/26/2022	

	Hours Worked	Gross Pay	Pre Tax Deductions	Employee Taxes	Post Tax Deductions	Net Pay
Current	54.00	3,567.43	215.50	485.29	16.74	2,849.90
YTD	1,034.50	64,661.49	3,663.50	9,034.20	284.58	51,679.21

Earnings

Description	Dates	Hours	Rate	Amount	YTD Hours	YTD Amount
DOUBLETIME			0		5.5	532.31
EVENING SHIFT			0		11.75	32.32
EXT SICK			0		14.73	834.63
FAMILY LOA/ILL			0		31.39	1,464.39
HOLIDAY PAY			0		23.75	1,651.58
NO MEAL			0		4	202.22
OVERTIME			0		21	1,503.45
SPSL			0		79	3,662.44
TRAINING - DT			0		1.75	169.32
TRAINING - REG			0		8.75	405.65
NIGHT SHIFT	08/07/22 - 08/13/22	32.5	4.25	138.13		
PAID TIME OFF	08/07/22 - 08/13/22	3.5	46.36	162.26		
REGULAR	08/07/22 - 08/13/22	32.5	46.36	1,506.70		
NIGHT SHIFT	08/14/22 - 08/20/22	21.5	4.25	91.38	1012.25	4,302.18
PAID TIME OFF	08/14/22 - 08/20/22	14.5	46.36	672.22	102.63	4,757.95
REGULAR	08/14/22 - 08/20/22	21.5	46.36	996.74	973.75	45,143.05
Earnings				3,567.43		64,661.49

Employee Taxes

Description	Amount	YTD
OASDI	207.92	3,783.50
Medicare	48.62	884.85
Federal Withholding	0.00	147.82
State Tax - CA	191.88	3,547.05
CA SDI - CASDI	36.87	670.98
Employee Taxes	485.29	9,034.20

Pre Tax Deductions

Description	Amount	YTD
Ee - Premium Dental	30.00	510.00
Ee - Premium HMO	185.50	3,153.50
Pre Tax Deductions	215.50	3,663.50

Post Tax Deductions

Description	Amount	YTD
Ee - Parking	2.50	42.50
Ee - Spouse Life	7.82	132.94
Ee - Supp Life Ins	6.42	109.14
Post Tax Deductions	16.74	284.58

Employer Paid Benefits

Description	Amount	YTD
IMPUTED LIFE	1.54	26.18
Employer Paid Benefits	1.54	26.18

Taxable Wages

Description	Amount	YTD
OASDI - Taxable Wages	3,353.47	61,024.17
Medicare - Taxable Wages	3,353.47	61,024.17
Federal Withholding - Taxable Wages	3,353.47	61,024.17
State Tax Taxable Wages - CA	3,353.47	61,024.17

Marital Status	Federal	State
	Married filing jointly (or Qualifying widow(er))	Single or Married (with two or more incomes)
Allowances	0	1
Additional Withholding	0	0

Absence Plans

Description	Accrued	Reduced	Available
ESI	2.15	0	4.3
PTO	7.69	18	42.48
SPSL	0	0	1

Payment Information

Bank	Account Name	Account Number	USD Amount	Amount
"SCHOOLSFIRST FED CREDIT UNION"	Checking	******4704		2,849.90 USD

Earnings   ✕

Selected Check	Year-to-Date

Gross Earnings

Net Pay $0.00

Payment Date   08/05/2022
Pay Begin Date   07/25/2022
Pay End Date   07/31/2022

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GMRI, Inc.

Ryan Moore

Restaurant Hourly Employee

Earnings	$330.15
Taxes	$143.84
Deductions	$32.64
Net Pay	$153.67

Payment Date	09/09/2022
Pay Begin Date	08/29/2022
Pay End Date	09/04/2022

Earnings	>
Taxes	>
Before-Tax Deductions	>
After-Tax Deductions	>
Net Pay Distribution	>

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GMRI, Inc.

Ryan Moore

Restaurant Hourly Employee

Earnings	$88.50
Taxes	$39.85
Deductions	$13.46
Net Pay	$35.19

Payment Date	09/02/2022
Pay Begin Date	08/22/2022
Pay End Date	08/28/2022

Earnings	>
Taxes	>
Before-Tax Deductions	>
After-Tax Deductions	>
Net Pay Distribution	>

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GMRI, Inc.

Ryan Moore

Restaurant Hourly Employee

Earnings	$408.90
Taxes	$195.07
Deductions	$40.62
Net Pay	$173.21

Payment Date	09/16/2022
Pay Begin Date	09/05/2022
Pay End Date	09/11/2022

Earnings	❯
Taxes	❯
Before-Tax Deductions	❯
After-Tax Deductions	❯
Net Pay Distribution	❯

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GMRI, Inc.

Ryan Moore

Restaurant Hourly Employee

Earnings	$164.25
Taxes	$80.43
Deductions	$21.84
Net Pay	$61.98

Payment Date	09/23/2022
Pay Begin Date	09/12/2022
Pay End Date	09/18/2022

Earnings	>
Taxes	>
Before-Tax Deductions	>
After-Tax Deductions	>
Net Pay Distribution	>

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